

Supporting
Documents
to written
Objection

Additional Primary Beneficiaries Acct #

My son

Samuel Moskowitz

Redacted

Birthdate

Redacted

S.S. #

Redacted

8455

My Daughter

Joelle Moskowitz

Redacted

Birthdate

Redacted

S.S. #

Redacted

6463

Please roll over my IRA account # Redacted -0001
into a Roth IRA Account. Please note that
the Limited Partnerships (Brazos Park Apartments
& Texas Carlyle Apartments Ltd) were sold on 10-13-97
and should no longer be listed as an Additional
investment valued at \$50,000. The Brokerage
account with Madoff should not be liquidated.
It should be rolled over intact into the new accounts

Thank You

Peter Moskowitz

Redacted

**RETIREMENT
ACCOUNTS, INC.**

Retirement Accounts, Inc.
717 17th Street, Suite 1700
Denver, Colorado 80202-3323
1-800-325-4352

Please Direct mail to:
P.O. Box 173785
Denver, CO 80217-3785

**Roth IRA Transfer/
Rollover/Conversion Form**

This form must be completed in addition to (or in conjunction with) a Retirement Accounts, Inc. (RAI) Roth Individual Retirement Account Application (since you need a Roth IRA at our firm to transfer, rollover or convert Roth IRA assets).

Section 1 - Current (Resigning) Trustee Information Complete for Roth IRA Transfers and Conversions from another institution.
(Please type or print in black ink.)

Current Trustee Retirement Accounts, Inc.
Mailing Address P.O. Box 173785
Denver, Co 80217-3785
City / State / Zip

Current Trustee Redacted
Account Number 4334
Telephone (include area code)
(800) 325-4352

Section 2 - Roth IRA Account Owner Information
(Please type or print in black ink.)

Your Name Peter Moskowitz
Mailing Address Redacted
City / State / Zip

Retirement Accounts, Inc. Roth IRA Account #

Social Security # Redacted - 2200
Date of Birth Redacted
Telephone (home) Redacted
(business) D. V. A.

Section 3 - Transfer/Rollover/Conversion Option

Transfer: Describes the movement of Roth IRA assets directly between Roth IRA trustees without distribution to the individual. As such, no tax forms are generated by either Roth trustee. (This process involves the transfer of an existing Roth IRA account; non-Roth IRA plan types may not be transferred to a Roth IRA.)

Rollover: Describes a cash and/or asset contribution to a Roth IRA by an individual within sixty (60) days of receipt of the eligible Roth IRA rollover distribution. To make this rollover, the individual must have received an eligible distribution (full or partial) from another Roth IRA outright. The individual may not roll over all or any part of a distribution from a business retirement plan, 401(a) or (b) annuity or any other non-Roth IRA. (Non-Roth IRA rollovers or direct rollovers from a business retirement plan may be made into a "Traditional" (non-Roth) IRA, and require the use of a different form.)

Conversion: Describes a cash and/or asset contribution to a Roth IRA from a Traditional IRA by taxpayers with Adjusted Gross Income under \$100,000 (and not married and filing separately). By checking the Conversion box, the Account Owner certifies that the conversion meets the requirements under law for a qualifying conversion contribution as defined in the Plan documents, and that he or she understands the tax consequences of the transaction.

Note: If the current trustee of a Traditional IRA does not "convert" cash and/or assets directly to RAI, but instead sends them directly to you as Account Owner, it is your responsibility to initiate the qualifying conversion contribution to your RAI Roth IRA. (You must ensure that the contribution is clearly indicated as a "Conversion." Please contact an RAI Customer Service Representative for further instructions.)

This will be a (choose one) ☐ Transfer ☐ Rollover ☐ Conversion

Section 4 - Asset List and Instructions The option described in Section 3 will be (choose one) ☐ Partial **OR** ☒ Complete (Please provide a copy of your most recent account statement for complete transfers or conversions. If Partial, please specify exact assets or dollar value below.)

Liquidate/Sell	Reregister*	Description of Asset/Cash	Dollar Value	Number of Shares	Acct # / Cert # / Maturity Date
	<input checked="" type="checkbox"/>	<u>ALL</u>	<u>\$ ALL</u>	<u>ALL</u>	
			\$		
			\$		
			\$		

***Assets should be reregistered to:**

Retirement Accounts & Co.
FBO PETER MOSKOWITZ Roth IRA
P.O. Box 173785
Denver, CO 80217-3785

For overnight delivery only
Retirement Accounts, Inc.
717 17th St., Suite 1700
Denver, CO 80202-3323

Make checks payable to Retirement Accounts, Inc.

Tax ID number: 84-1314088.

THIS FORM MUST BE SIGNED ON PAGE 2.

(Continued on the reverse side.)

RAI IRA Distribution Request (continued)

Bank Account No. _____

City/State/Zip _____

☐ C. Transfer/journal the above distribution(s) to my personal account no. _____ at my designated brokerage firm. (Securities can be transferred/journalled only within the same brokerage firm.)

☐ D. Special instructions: _____

If no selection is made, payment will be sent to address of record. Distributions may only be sent to the Account Owner or Account Owner's personal brokerage or bank account. There is a \$35 charge per wire. Fees may apply for special delivery services.

☒ E. Send the distribution to my RAI Roth IRA account # _____ (for rollover conversion purposes only). To establish a Conversion Roth IRA, a Roth IRA Application form must be completed.

8. Tax Withholding (choose one)

☒ A. I do NOT want federal income tax withheld from my distribution(s). (Note: Even if you choose this option, federal income tax must be withheld from this distribution if you have not provided a U.S. residence address (not a P.O. Box) in Section 1.)

☐ B. I DO want federal income tax withheld from my distribution(s). I understand that ten percent (10%) of the distribution will be withheld. [If you want a greater percentage withheld, indicate here: _____ %. A percentage amount must be designated.]

(See the notice of tax withholding at the end of this form. If no choice is made above, withholding tax will be deducted.)

9. Account Information (check one)

☒ A. I DO wish to close my account at this time. I understand that the requested distribution will be subject to a termination fee(s).

☐ B. I do NOT wish to close my account at this time.

Termination fees, if not included with a request to terminate or transfer the account, will be deducted from available Peak Money Market Account funds. If cash is unavailable, termination fees will be billed.

10. Signature and Acknowledgment

I acknowledge the declarations made above.

IRA Account Owner's

Signature ☒ Peter M. Kowalski
Date 2-17-97

One choice from each applicable item must be checked. When completed, please return this form to Retirement Accounts, Inc.

Notice of Withholding on Distributions or Withdrawals From IRAs

This notice is required to be furnished to you by IRS regulations each time an IRA distribution is requested.

The distributions you receive from your retirement plan are subject to federal income tax withholding. You are liable for payment of federal income tax on the taxable portion of your distribution regardless of whether you elect to have tax withheld. If you have provided Retirement Accounts, Inc. your residence address within the United States, you may elect not to have withholding apply. Withholding will only apply to the portion of your distribution that is included in your income subject to federal income tax. If you have not provided Retirement Accounts, Inc. with your residence address, or if you have provided a residence address outside of the United States, withholding generally is required. You cannot elect out of withholding.

If you are eligible (as explained above), you may elect not to have withholding apply to your distribution payments by signing and dating the election form under Section 8 of the Distribution Request Form.

If you elect not to have withholding apply to your distribution payments, or if you do not have enough federal income tax withheld from your distribution, you may be responsible for payment of estimated tax.

If you intend to make a rollover deposit of the distribution you are receiving, you should consider the election not to have tax withheld.

If you do not return the election form before the distribution is made from your account, federal income tax will be withheld from your distribution.

Your election will remain in effect until you revoke it and will be honored for all future distributions from this IRA. You may revoke an election by completing a new Distribution Request Form.



RETIREMENT ACCOUNTS, INC.

Retirement Accounts, Inc.
717 17th Street, Suite 1700
Denver, Colorado 80202-3323
1-800-325-4352

Please direct mail to:
P.O. Box 173785
Denver, CO 80217-3785

IRA Distribution Request Form

I. IRA Account Owner Information (please type or print)

Retirement Accounts, Inc. Account # Redacted 4334
Name PETER MOSKOWITZ
Residence Address (not a P.O. Box) Redacted
City/State/Zip Redacted
Check here if this is a change of address. ☐
Daytime Phone Redacted
Date of Birth Redacted
Social Security # Redacted - 2200

Retirement Accounts, Inc. (RAI) as Trustee of my Individual Retirement Account, is requested to make payment(s) to me as follows:

2. Reason for Distribution (check one)

- ☒ A. I am under age 59½. I understand the IRS 10% premature distribution penalty tax may be imposed on this payment.
- ☐ B. This distribution is intended to qualify as a "substantially equal" payment under Section 72(t) of the Internal Revenue Code.
- ☐ C. I have become disabled as defined in Section 72(m) of the Internal Revenue Code. I have completed and attached RAI's Acknowledgment of Disability Form.
- ☐ D. I am over age 59½.
- ☐ E. I am over age 70½ and this distribution is intended to satisfy my Required Minimum Distribution. (Please also complete Section 5.)
- ☐ F. I wish to have a recent contribution removed or corrected. (Please also complete Section 6.)
- ☐ G. I intend to use this distribution to pay for medical expenses that are in excess of 7.5% of my adjusted gross income.
- ☐ H. I intend to use this distribution to pay for health insurance premiums as permitted to unemployed individuals under IRS Code section 72(t)(2)(D).
- ☐ I. I intend to use this distribution to pay for "qualified higher education expenses" as permitted and defined under IRS Code Section 72(t)(2)(E).
- ☐ J. I wish to take a "qualified first-time homebuyer distribution" as permitted and defined under IRS Code Section 72(t)(2)(F).

Do not use this form for a Trustee-to-Trustee Transfer.

3. Payment Amount(s) (check one and complete applicable blanks)

- ☐ A. Single Payment:
I wish to withdraw _____
from my IRA. (Fill in dollar amount or write in "total amount," or "200 shares of XYZ stock," etc.)

B. Installment Payments:

If you are age 70½ or older, please read and complete the "Information Concerning Minimum Distributions" in Section 5. Then complete following items 2, 3 and 4. Otherwise, complete all information following.

1. Installment payments are a specified dollar amount or are based on a given payment period. I choose:
- ☐ a. an amount of \$ _____ for each payment period. (Specify exact amount or enter "all available cash.")
- ☐ b. a fixed period of _____ years.
2. The first payment should be deducted in the month of _____, 19____.
3. Please deduct and send my payments (choose one):
- ☐ near the middle of the applicable month.
- ☐ at the end of the applicable month.
4. Subsequent payments are to be paid (choose one):
- ☐ annually ☐ semiannually
- ☐ quarterly ☐ monthly ☐ bimonthly

(Note: You, the IRA Account Owner, must ensure that enough cash is available to make each payment when due. Payments will continue until you notify RAI to the contrary.)

4. Asset Instructions

- ☐ A. Payment to be made in cash (choose all that apply):
- ☐ 1. I authorize RAI to liquidate or reregister the asset(s) listed below.
- ☐ 2. I have contacted my Designated Representative to liquidate any broker-held assets (such as stocks and bonds) or any limited partnerships or other illiquid assets I choose to have sold. My Designated Representative will be responsible for forwarding funds to RAI.
- ☐ 3. My Peak Money Market balance is sufficient to make the distribution.
- ☐ 4. I authorize RAI to request funds from my brokerage account # _____ at _____ brokerage firm.
- ☒ B. Distribute (reregister) shares of the following assets into my personal name to make up the requested amount.

Please list assets here:

# Shares	\$ Amt	Name of Asset	Liquidate / Sell	Reregister
ALL	ALL	ALL ASSETS	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>

(Continued on the reverse side)

Self-Directed Roth Individual Retirement Account Application (continued)

Roth IRA Plan Type (choose only one):

- ☐ **Roth IRA (Contributory)** is intended for contributions (up to a maximum of \$2,000 annually) which are not tax deductible, but which may be withdrawn tax-free if part of a "qualified distribution." This plan type includes Spousal Roth IRAs, in which a separate Roth IRA must be established (with a separate Application) for each spouse.
- ☒ **Roth Conversion IRA** is intended for conversion contributions from a "Traditional" IRA into this Plan (during a single tax year) by taxpayers with Adjusted Gross Income under \$100,000 and not married filing separately. Designating this plan type certifies that the conversion meets the requirements under law for qualifying rollover contributions defined in the Plan documents.
- ☐ **Roth Combined IRA** is intended for accounts containing both annual Roth IRA contributions and conversion contributions or conversion contributions for different tax years. Designating this plan type certifies that the conversion(s) meet the requirements under law for qualifying rollover contributions defined in the Plan documents, and the account owner understands that the five-year exclusion period for receiving tax-free "qualified distributions" may be extended by making an additional conversion contribution into the same Roth IRA. This plan type allows the account owner to pool regular Roth IRA contributions and conversion contributions for investment purposes.

Roth IRA Program Fee Schedule Selection

- ☒ Simple Roth IRA ☐ Flexible Roth IRA

Check Enclosure Summary

Roth IRA Contribution for 19__ (\$2,000 maximum) \$	
Roth IRA Contribution for 19__ (\$2,000 maximum) \$	
Cash Roth Rollover Contribution	\$
Cash Conversion Contribution	\$
Establishment Fee* (\$25 Simple, \$50 Flexible)	\$ 25
Annual Administration Fee (Simple*: \$58; Flexible: .4% of asset value billed biannually)	\$ 58
Total Enclosed (Make checks payable to "Retirement Accounts, Inc.")	\$ 83

*These fees must be paid at time of application.

Your Acknowledgment and Signature

Having read all pages of this application, the Plan and Trust Agreement and the Disclosure Statement, I understand and agree:

- To manage the investment of this Roth IRA pursuant to the provisions of the Roth IRA Plan and Trust Agreement.
- To the Arbitration Agreement (stated herein).
- That, unless I answered **NO** to telephone authorization (the TAP service), I have authorized Retirement Accounts, Inc. to honor telephone transaction requests for my account. I understand and agree that Retirement Accounts, Inc. is not responsible for determining whether or not a caller is authorized other than verifying that such caller is using the proper identifying number for my account. I understand and agree that neither Retirement Accounts, Inc. nor its agents will be responsible for unauthorized trades in my account.
- That Retirement Accounts, Inc. has installed automatic telephone recording equipment on telephone lines used by Customer Service Representatives who handle trading processing and client inquiries

and I give Retirement Accounts, Inc. consent to record and play back such calls.

- That I have received and accept the Trustee's fee schedule.

In witness whereof, I evidence adoption of the Plan by execution of this Adoption Agreement on the date below.

Account Owner's
Signature

X *Reth Mahoney*

Date

Feb 2, 1998

Retirement Accounts, Inc. hereby accepts appointment as Trustee of this Roth IRA.

Retirement Accounts, Inc.
By:

Account Number (RAI will complete)

Redacted 4151

Valuation Reporting Policy

Each Account statement you receive shows the value of your assets, all transactions that have taken place and all fees that have been charged. RAI reports the value of account securities as accurately as possible using the resources available to us. The prices listed on your RAI account statement may differ slightly from the values listed on your brokerage account or other investment sponsor statements. RAI cannot guarantee the accuracy of prices obtained from quotation services, nor the length of availability of such prices. Assets marked N/A indicate that a current price was not available at the time of valuation, or that the security had no value. Illiquid assets (such as limited partnerships and private stock) are generally reflected at original offering cost to investors unless we receive written notification verifying a new "fair market value" from an officer representing the investment.

Note: Retirement Accounts, Inc. does not conduct appraisals of investments, and it does not seek to verify any values reported to it by officers representing the investments. You should refer to reports received from the general partner, corporate issuer or sponsor (or contact these sources directly) with regard to the current operation and status of your chosen asset(s). The account statement (and reported values therein) should not be used as a basis for making, retaining or disposing of an investment. Please contact your Designated Representative with additional questions.

Arbitration Statement

The Account Owner hereby agrees that all claims and disputes of every type and matter which may arise between the Account Owner and Retirement Accounts, Inc. shall be submitted to binding arbitration pursuant to the rules of the American Arbitration Association, that such arbitration proceedings and hearings shall take place only in Denver, Colorado; and that, to the extent not preempted by federal law, Colorado statutory law (including without limitation the statutes governing the award of damages in arbitration) and Colorado common law shall control during arbitration. The Account Owner expressly waives any right he/she may have to institute or conduct litigation or arbitration in any other forum or location, or before any other body. Arbitration is final and binding on the parties. An award rendered by the arbitrator(s) may be entered in any court having jurisdiction over the parties. Under the rules of the American Arbitration Association, there may be no right to prearbitration discovery, including depositions or written questions and document production. The arbitrator's award is not required to include factual findings or legal reasoning, and any party's right to appeal or seek modification of rulings by the arbitrator(s) is strictly limited.